

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000158864

Entity Name: BEFAR CORPORATION

FILED
Apr 28, 2005
Secretary of State

Current Principal Place of Business:

14311 N. KENDALL DRIVE
NO. 103
MIAMI, FL 33186

New Principal Place of Business:

802 E MOWRY DR
NO. 104
HOMESTEAD, FL 33030

Current Mailing Address:

14311 N. KENDALL DRIVE
NO. 103
MIAMI, FL 33186

New Mailing Address:

802 E MOWRY DR
NO. 104
HOMESTEAD, FL 33030

FEI Number: 20-1924220

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FARIA, BERTHA M
14311 N. KENDALL DRIVE
NO. 103
MIAMI, FL 33186 US

Name and Address of New Registered Agent:

FARIA, BERTHA M
802 E MOWRY DR
NO. 104
HOMESTEAD, FL 33030 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

04/28/2005

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: FARIA, BERTHA M
Address: 14311 N. KENDALL DRIVE NO. 103
City-St-Zip: MIAMI, FL 33186

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: FARIA, BERTHA M
Address: 802 E MOWRY NO. 104
City-St-Zip: HOMESTEAD, FL 33030

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BERTHA M FARIA

D

04/28/2005

Electronic Signature of Signing Officer or Director

Date